## Form **741**

42A741 Department of Revenue

For calendar year or other taxable year



	KENTUCKY
. 2009.	FIDUCIARY INCOMETAX RETURN



beginning, 20	08, and ending	, 2009.	FIDUCIARY IN	COME TAX RETUR	N <b>ZUUO</b>
Check applicable box:	Name of Estate or Trust			Federal Employer	Identification Number
☐ Decedent's estate					
☐ Simple trust					
☐ Complex trust	Name and Title of Fiduciar	/		Date Entity Create	ed
☐ ESBT (S portion only)					
☐ Grantor trust					
☐ Bankruptcy estate	Address of Fiduciary (Num	ber and Street or P.O. Bo	ox)	Ro	om or Suite Number
☐ Pooled income fund					
Check applicable boxes:	City, State and ZIP Code			Telephone	Number
☐ Initial return					
☐ Amended return					
☐ Final return	Number of Schedu	les K-1 attached.	<b>&gt;</b>	(Copies Must Be	Attached)
Attach a cou	oy of the federal retui				· · · · · · · · · · · · · · · · · · ·
-	-	_			
	ncome (federal Form 1041			1	
	, Schedule M, line 4)				
•	ductions allocable to line 2				
	e 2				
				5	
	e 2, Schedule M, line 8)				
	ductions allocable to line 6			0	
<ul><li>8. Subtract line 7 from lin</li><li>9. Subtract line 8 from lin</li></ul>	e 6 Kontusku			8	
	•	-		0	
10. Income distribution dec	le B, line 1			9	
	)		10		
	ion (attach Schedule P, if n				
	ction (attach computation				
13. Add lines 10, 11 and 12				13	
14. Total income of fiducia	ry (subtract line 13 from li	ne 9)		14	
14. Total income of fiduciary (subtract line 13 from line 9)					
15. Trusts or estates with i	ncome attributable to nor	resident beneficiari	es. Enter the portion of		
intangible income inclu	ided in line 14 that is attrib	outable to <b>nonreside</b>	nt beneficiaries.		
Enter zero if not applica	able. See instructions			15	
16. Taxable income of fidu	ciary (subtract line 15 fron	n line 14) <b>This is you</b>	r taxable income	16	
TAX COMPUTATION					
17. Tax: (a) tax rate schedu			c) Schedule RC-R	<b>Total</b> 17(d)	
	) (specify and attach supp	-		18	
	a trust; \$20 for an estate)				
	18 and 19 from line 17d; if			er -0-)20	
	ments				
_	h wage and tax statement				
	olding from Form PTE-WI			24/4/	
22. Subtract line 21(d) from	(a), (b) and (c))				
I declare under the pe	nalties of perjury that this r knowledge and belief, is a	eturn (including any a	accompanying schedules a		peen examined by me
Signature of Fiduciary or Agent		PTIN or Identificatio	n Number of Fiduciary or Agent		Date
Typed or Printed Name of Preparer Oth	erThan Fiduciary or Agent	Identification	on Number of Preparer		Date



SC	HEDULE A—CHARITABLE DEDUCTION (Do not complete for a simple trust or pooled income fund.)	
	mplete Schedule A only if you made additions to or subtractions from total income on page 1, lines 2 or 6 a	nd claimed a charitable
ded	duction on federal Form 1041.	
1.	Kentucky taxable income that was paid or set aside for charitable purposes and was not reported on federal	
	Form 1041, Schedule A, including additional capital gains. Enter here and include on Schedule M, line 7 1	
2.	Kentucky tax-exempt income that was paid or set aside for charitable purposes that was reported on	
	federal Form 1041, Schedule A. Enter here and include on Schedule M, line 3	
SC	HEDULE B—INCOME DISTRIBUTION DEDUCTION (See federal instructions.)	
1.	Adjusted total income (enter amount from page 1, line 9)	
2.	Adjusted tax-exempt interest	
3.	Net gain shown on Schedule D, Form 741, column 1, line 17 (if net loss, enter zero)	
4.	Enter amount included from federal Schedule A, line 4	
5.	Enter net capital gains included on Kentucky Schedule A, line 1 or line 2	
6.	Enter any Kentucky gains included on page 1, line 9 as a negative figure. If capital loss, enter as a	
	positive figure. (Kentucky gain/loss includes federal figures plus Kentucky adjustments.)	
7.	Distributable net income (combine lines 1 through 6)	
8.	If complex trust, enter accounting income for tax years as determined under the governing	
	instrument and applicable law	
9.	Amount of income required to be distributed currently	
10.	Other amounts paid, credited or otherwise required to be distributed	
11.	Total distributions (add lines 9 and 10) (If greater than line 8, see federal instructions.)	
12.	Enter the amount of tax-exempt income included on line 11	
13.	Tentative income distribution deduction (subtract line 12 from line 11)	
14.	Tentative income distribution deduction (subtract line 2 from line 7)	
15.	Income distribution deduction (enter the smaller of line 13 or line 14 here and on page 1, line 10)	
SC	HEDULE M (FORM 741)	
Par	t I—Additions to Federal Adjusted Total Income	
1.	Enter interest from bonds issued by other states and their political subdivisions	
	Enter additions from partnerships, fiduciaries and S corporations (attach schedule)	
	Other additions (attach schedule)	
4.	Total additions. Enter here and on page 1, line 2	
Par	t II—Subtractions from Federal Adjusted Total Income	
5.	Enter interest from U.S. government obligations (attach schedule)	

## **ADDITIONAL INFORMATION REQUIRED**

- Was a Kentucky fiduciary income tax return filed for 2007?
   □Yes □ No. If "No," state reason.
- 2. If the fiduciary has income not taxed by Kentucky, have you deducted only that portion of expenses allocable to taxable income? ☐ Yes ☐ No. If "Yes," attach computation.
- 3. Did the estate or trust have any passive activity loss(es)?

  ☐Yes ☐ No. (If "Yes," enter the loss(es) on Form 8582-K,
  Kentucky Passive Activity Loss Limitations, to determine
  the allowable loss.)

- 4. If a federal audit changed the taxable income as originally reported for any prior year, a copy of the Revenue Agent's Report must be submitted to the Department of Revenue. Do not attach to this return.
- During the taxable year did you make an accumulation distribution as defined in Sec. 665(b), Internal Revenue Code? □Yes □No. If "Yes," attach federal Schedule J (Form 1041)
- If this is an amended return, check the appropriate box on page 1. Explain changes below. Attach a separate page if necessary.